Please type a plus sign (+) inside this pox

10/539.572: Conf #4337 Application Number June 17, 2005 REVOCATION OF POWER OF Filing Date ATTORNEY WITH First Named Inventor Bertrand Viellerobe NEW POWER OF ATTORNEY AND Art Unit 2621 CHANGE OF CORRESPONDENCE ADDRESS David N. Werner Examiner Name

	Attorney Docket Number	17452/017001
I hereby revoke all previous powers of attorney given in the above-identified application.		
X A Power of Attorney is submitted herewith. OR I hereby appoint the practitioners associated with the Customer Number:		
X Please change the correspondence address for the above-identified application to: X The address associated with Customer Number: 22511		
OR Firm or Individual Name		THE STATE OF THE S
Address		
City		
Country State		Zip
Telephone	Email	
I am the: Applicant/inventor. X Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		
SIGNATURE of Applicant or Assignee of Record		
Signature Herida		
Name Alexandre LOISE AU, Title: President, of Mauna Kea Technologies		
Date Nov 4th 200 9 Telephone +011 33 1 48 240 621		
NOTE: Signatures of all the inventors or assigness of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below."		
x *Total of 3 forms are submitted		

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